personnel and to provide integrated service delivery for basic reproductive and child health care.

(ii) The medium-term objective is to bring the total fertility rates to replacement level by 2010, through vigorous implementation of inter-sectoral operational strategies.

(iii) The long-term objective is to achieve population stabilisation by 2045, at a level consistent with the requirements of sustainable economic growth, social development, and environmental protection.

The National Population Policy envisages mainstreaming the Indian System of Medicine and Homoeopathy. Incorporating the ISM&H in basic reproductive and child health care will expand the pool of effective health care providers, optimize utilization of locally based remedies and cures, and promote low-cost health care. This involves:

Providing appropriate training and orientation in respect of the RCH programme for the institutionally qualified ISM&H medical practitioners and utilizing their services to fill in gaps in manpower.

Utilizing the ISM&H institution, dispensaries and hospitals for health and population related programmes.

Disseminating the tried and tested concepts and practices of the indigenous system of medicine, together with ISM&H medication at village maternity huts and at household levels.

Utilizing the services of ISM&H "barefoot doctors' after appropriate training and orientation.

Developing Indian System in the light of indigenous medicines

†3698. DR. D. MASTHAN:
SHRI KAPIL SIBAL:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have explored the possibilities of developing Indian system with regard to indigenous medicines?

(b) if so, the plan of Government; and

(c) the results achieved so far?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND

†Original Notice of the Question was received in Hindi.

FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) to (c) The Government are initiating steps to make available good quality medicinal plants, setting up a Medicinal Plants Board, Preparing Schemes to assist upgradation of State Pharmacies and Laboratories, introducing good manufacturing practices to be followed by manu-facturers and prescribing for some basic tests on drugs to ensure their safety and public acceptability. In addition, preparation of formulary and Pharmacopoeial standards are also undertaken and good progress has been made.

Demand for accupuncture system of treatment

3699. SHRI P. PRABHAKAR REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is a growing demand from the public in favour of adopting the accupuncture system of treatment in public hospitals; and

(b) if so, the steps proposed to be taken to concede the demand?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRUI N.T. SHANMUGAM): (a) and (b) Accupuncture is not recognised by the Government as an Alternative system of Medicine. However, accupuncture therapy is being as one of the treatment modalities for relief of pain, in some Central Government Hospitals like Safdarjung Hospital and LHMC & Associated Hospitals at Delhi.

Eighth India Population Project

3700. SHRI SHIBU SOREN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Cabinet Committee on Economic Affairs has approved the expansion of there non- going World Bank assisted Eight-India Population Project;

(b) if so, the details of the projects in Bihar and West Bengal;

(c) whether Government propose to start any special development projects for tribals;

(d) if so, the details thereof; and

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